evidence of anatomical or functional hyposplenia and of instituting measures such as antibiotic prophylaxis, vaccination against pneumococcal and *H influenzae* infection, and early treatment with antibiotics at the first sign of infection.

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1 Dyke MP, Martin RD, Berry PJ. Septicaemia and adrenal haemorrhage in congenital asplenia. Arch Dis Child 1991;66: 636-7.

Dr Langdon Down

SIR,—Peter Dunn's cameo is a helpful reminder of a distinguished physician. I However, Down published a good deal more than the article implies. In the 1887 Lettsomian lectures and a series of case studies Down described a diverse range of conditions. These included pseudohypertrophic muscular dystrophy ('by the aid of a harpoon I extracted specimens of the muscle from both gastrocnemii') of which he gives an accurate pathological description. He also describes patients with what is now called Asperger's syndrome, and children with Prader-Willi syndrome, fetal alcohol syndrome, hypothyroidism, dysgenesis of the corpus callosum and others.

There were some themes in which he took particular interest ranging from two articles on the mouth in people with mental retardation, the exaggerated criticism of traumatic childbirth as a cause of disability, the unsuitability of siting schools for mentally handicapped children in hospitals for the mentally ill, and the relief experienced by parents when told that their children's disabilities predated the process of birth. He was also an advocate for full educational opportunities for women.

This material, first collected and published by the Medical Society of London in 1887, has been reprinted by MacKeith Press as the fifth in their excellent series of Classics in Developmental Medicine.²

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Dunn PM. Dr Langdon Down (1828-1896) and 'mongolism'. Arch Dis Child 1991;66:827-8.
 Down JL. On some of the mental affections of childhood and youth. Oxford: MacKeith Press/Blackwell, 1990.

BOOK REVIEWS

Diseases of Children in the Subtropics and Tropics. 4th Ed. Edited by P Stanfield, M Brueton, M Chan, M Parkin, and T Waterson. (Pp 1076; £90 hardback.) Edward Arnold, 1991. ISBN 0-340-50633-4.

A new edition of what was Jelliffe's textbook of 'tropical paediatrics' is very welcome. Jelliffe in his foreword to the 4th edition talks of two main routes to be balanced in the effective promotion of child health, that is, specialisation, and child health and community. This book encompasses both routes. There are six sections each with its own editor and 15–20 contributors. The first three general sections cover maternal and child health, maternal and neonatal care, growth and development. Two disease specific sections of systems. There is a final section on practical aids.

The contents contained everything it should. Although it is invidious to praise specific contributions, my favourites were: immunisation, protein energy malnutrition, and tuberculosis; other people might choose others. One problem I found was that some subjects were divided so that at times it was difficult to track down the relevant parts in the book, for example, gastroenteritis is dealt with in maternal and child health (oral rehydration services) and in infectious disease (diarrhoeal diseases). Nutritional supplementation programmes appear in the maternal and child health section, and nutritional rehabilitation is in the nutrition section of growth and development. In such a large book it was difficult to get an overall feel for the major medical causes of child mortality, and morbidity in the topics. The top three, that is, respiratory infection, diarrhoeal disease, and protein energy deficiency are all there and are dealt with effectively but get lost to some extent in the pith of the book. The remainder of the top 10 such as malaria, anaemia, tuberculosis, and so on are again dealt with well but their relative importance to overall child health is not clear. The introductory chapter might have set the scene better. Informative as it is, the chapter contains very selected mortality statistics but little breakdown by age and cause, and few measurements of morbidity. Perhaps my difficulties show I have become wedded to the medical model while the authors have escaped this straight jacket. The chapters/sections on cultural factors, delivery of individual services, the doctor as teacher, and child care in refugee situations are fascinating. They would not have been included in a more traditional approach and this book is much stronger as a result.

The editors say in their preface 'A balance has to be struck between the assembly of the information and instruction needed by the paediatrician in the reference centres of excelence, and the study and practice of management at the level of primary care'. The authors have achieved a commendable balance of emphasis in this very wide field.

BRIAN WHARTON Rank professor of human nutrition

Advances in Pediatric Infectious Diseases. Volume 6. By S Aronoff, W Hughes, S Kohl, W Speck, and E Wald. (Pp 200; £36·50 hardback.) Mosby Year Book, 1991. ISBN 0-8151-0308-5.

The editors of this series have again provided a useful and interesting update of important topics in paediatric infectious disease.

This volume covers new developments in vaccines against four major paediatric pathogens: *Haemophilus influenzae* type b, pertussis, rotavirus, and varicella. There are also three

chapters on specific infections, namely measles, ehrlichiosis, and human herpes virus 6 (HHV-6) and four chapters addressing more general issues such as viral encephalitis, infected burns, skeletal infections, and the screening of immigrant children.

As the entire book emanates from US based authors, inevitably not all material presented is applicable to British or Australian paediatric practice. The authorship, as with previous volumes, comprises several recognised leaders in paediatric infectious disease.

True to its objective, this volume covers issues of contemporary concern with references right up to 1990. This is exemplified by the chapter on new developments in vaccines. It documents the change in US policy regarding the recommended age of immunisation against *H influenzae* type b. In March 1990, universal immunisation was recommended at 15 months of age instead of 18 months, but by October last year, this was again revised to recommend immunisation from 2 months of age, a change which was hinted at as pending in the text.

The infectious aetiology of several paediatric syndromes has been elucidated in recent years. This gratifying shift in understanding is reflected in the chapter on HHV-6, the cause of roseola infantum, also known rather appropriately as sixth disease.

The ongoing problems presented by pertussis and measles are expertly covered, though it is odd that the issue of pertussis should be covered again since it appeared in the previous volume. Also surprising was that in the authors' presentation of their contrasting views on the timing of licensure of acellular pertussis vaccines, one argued anecdotally regarding the reactogenicity of whole cell pertussis vaccine.

In the chapters on viral encephalitis and screening immigrant children, the authors have taken a practical approach in which they document their own strategies of management. The topics of infected burns and skeletal infections are dealt with ably and comprehensively.

The book is attractively presented and well referenced and apart from confusing staphyloccocus with streptococcus in two tables dealing with paediatric skeletal infections, there are few typographical errors. It is of relevance to those practicing in the paediatric infectious disease field. Given that infection is the 'bread and butter' of general paediatric practice, most chapters in this volume will be appreciated by the general paediatrician who is keen to keep abreast of advances in this interesting field.

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Childhood Cancer: Understanding and Coping. By Henry Ekert. (Pp 185; \$16 paperback.) Gordon and Breach Science Publishers, 1989. ISBN 2-88124-356-8.

When a child has cancer what are the needs of those around him as regards information? First and foremost, of course, they need a sympathetic paediatric oncologist who has the time to sit down and explain the problem in detail. As there are so many factors that are peculiar to the individual child it may be misleading to turn to books for information without guidance.

Dr Ekert's book is intended for parents, relatives, and friends of children and adolescents with cancer. Of the 22 chapters, the first